

**U.S. DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS
ATTORNEY APPEARANCE FORM**

NOTE: In order to appear before this Court an attorney must either be a member in good standing of this Court's general bar or be granted leave to appear *pro hac vice* as provided for by Local Rules 83.12 through 83.14.

In the Matter of

Case Number: 08 CV2229

Joseph Barker, Regional Director of Region 13 of the NLRB
for and on behalf of the National Labor Relations Board
v.

Regal Health and Rehab Center

AN APPEARANCE IS HEREBY FILED BY THE UNDERSIGNED AS ATTORNEY FOR:
Regal Health and Rehab Center

NAME (Type or print) Peter Andjelkovich	
SIGNATURE (Use electronic signature if the appearance form is filed electronically) s/ Peter Andjelkovich	
FIRM Peter Andjelkovich & Associates	
STREET ADDRESS 39 South LaSalle Street, Suite 200	
CITY/STATE/ZIP Chicago, IL 60603	
ID NUMBER (SEE ITEM 3 IN INSTRUCTIONS) 3125947	TELEPHONE NUMBER 312/782-8345
ARE YOU ACTING AS LEAD COUNSEL IN THIS CASE? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
ARE YOU ACTING AS LOCAL COUNSEL IN THIS CASE? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
ARE YOU A MEMBER OF THIS COURT'S TRIAL BAR? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
IF THIS CASE REACHES TRIAL, WILL YOU ACT AS THE TRIAL ATTORNEY? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
IF THIS IS A CRIMINAL CASE, CHECK THE BOX BELOW THAT DESCRIBES YOUR STATUS. RETAINED COUNSEL <input type="checkbox"/> APPOINTED COUNSEL <input type="checkbox"/>	